

RENNES HEALTH CENTER-EAST

701 WILLOW STREET, PO BOX 188

PESHTIGO 54157 Phone: (715) 582-3962

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/05): 139

Total Licensed Bed Capacity (12/31/05): 139

Number of Residents on 12/31/05: 124

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 121

Corporation

Skilled

No

Yes

Yes

121

Age, Gender, and Primary Diagnosis of Residents (12/31/05)		Length of Stay (12/31/05)	
Primary Diagnosis	%	Age Groups	%

Primary Diagnosis	%	Age Groups	%	Length of Stay (12/31/05)	%
Developmental Disabilities	1.6	Under 65	8.9	Less Than 1 Year	37.9
Mental Illness (Org./Psy)	45.2	65 - 74	11.3	1 - 4 Years	37.1
Mental Illness (Other)	8.1	75 - 84	36.3	More Than 4 Years	25.0
Alcohol & Other Drug Abuse	0.0	85 - 94	37.9		-----
Para-, Quadra-, Hemiplegic	0.0	95 & Over	5.6		100.0
Cancer	0.8		-----	Full-Time Equivalent	
Fractures	0.0		100.0	Nursing Staff per 100 Residents	
Cardiovascular	16.9	65 & Over	91.1	(12/31/05)	
Cerebrovascular	8.9		-----		
Diabetes	0.0	Gender	%	RNs	8.1
Respiratory	0.0		-----	LPNs	8.5
Other Medical Conditions	18.5	Male	33.1	Nursing Assistants,	
	-----	Female	66.9	Aides, & Orderlies	35.9
	100.0		-----		
			100.0		

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care		Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Skilled Care	6	100.0	313	100	100.0	118	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	106	85.5	
Intermediate	---	---	---	0	0.0	0	0	0.0	0	18	100.0	159	0	0.0	0	0	0.0	0	18	14.5	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	6	100.0		100	100.0		0	0.0		18	100.0		0	0.0		0	0.0		124	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/05				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	13.1	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	4.7	Bathing	3.2	83.9	12.9	124
Other Nursing Homes	3.7	Dressing	4.8	68.5	26.6	124
Acute Care Hospitals	75.2	Transferring	19.4	65.3	15.3	124
Psych. Hosp.-MR/DD Facilities	1.4	Toilet Use	12.1	71.8	16.1	124
Rehabilitation Hospitals	0.0	Eating	56.5	28.2	15.3	124
Other Locations	0.0	*****				
Total Number of Admissions	214	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	8.9	Receiving Respiratory Care		11.3
Private Home/No Home Health	19.8	Occ/Freq. Incontinent of Bladder	46.8	Receiving Tracheostomy Care		0.8
Private Home/With Home Health	21.3	Occ/Freq. Incontinent of Bowel	32.3	Receiving Suctioning		1.6
Other Nursing Homes	7.4			Receiving Ostomy Care		4.0
Acute Care Hospitals	20.3	Mobility		Receiving Tube Feeding		3.2
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	4.0	Receiving Mechanically Altered Diets		38.7
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	21.3	With Pressure Sores	5.6	Have Advance Directives		90.3
Total Number of Discharges		With Rashes	8.9	Medications		
(Including Deaths)	202			Receiving Psychoactive Drugs		72.6

 Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	88.9	86.8	1.02	88.8	1.00	88.3	1.01	88.1	1.01
Current Residents from In-County	70.2	76.7	0.91	81.0	0.87	70.5	1.00	77.6	0.90
Admissions from In-County, Still Residing	15.4	16.9	0.91	23.7	0.65	20.5	0.75	18.1	0.85
Admissions/Average Daily Census	176.9	168.8	1.05	124.7	1.42	123.5	1.43	162.3	1.09
Discharges/Average Daily Census	166.9	172.6	0.97	127.4	1.31	126.7	1.32	165.1	1.01
Discharges To Private Residence/Average Daily Census	68.6	69.5	0.99	53.4	1.28	50.1	1.37	74.8	0.92
Residents Receiving Skilled Care	85.5	95.0	0.90	96.8	0.88	94.1	0.91	92.1	0.93
Residents Aged 65 and Older	91.1	92.7	0.98	92.1	0.99	92.5	0.99	88.4	1.03
Title 19 (Medicaid) Funded Residents	80.6	67.3	1.20	68.7	1.17	70.2	1.15	65.3	1.23
Private Pay Funded Residents	14.5	18.0	0.81	18.5	0.78	19.0	0.76	20.2	0.72
Developmentally Disabled Residents	1.6	0.6	2.90	0.4	3.93	0.5	3.36	5.0	0.32
Mentally Ill Residents	53.2	29.4	1.81	38.6	1.38	37.2	1.43	32.9	1.62
General Medical Service Residents	18.5	28.0	0.66	24.6	0.75	23.8	0.78	22.8	0.81
Impaired ADL (Mean)	49.4	48.0	1.03	48.5	1.02	47.2	1.05	49.2	1.00
Psychological Problems	72.6	53.5	1.36	57.4	1.27	58.9	1.23	58.5	1.24
Nursing Care Required (Mean)	9.3	6.8	1.36	7.1	1.30	7.1	1.30	7.4	1.25